

II. INTRODUCTION

Mission Statement:

The mission of the Lewis County Health Council is to promote the general and behavioral health of the community through education, awareness, and interventions to improve the physical, economic, and social lifestyles of our citizens.

Definition of Community Diagnosis:

A simple definition used by the North Carolina State Center for Health and Environmental Statistics of a community diagnosis is “a means of examining aggregate health and social statistics, liberally spiced with knowledge of the local situation in order to determine the health needs of the community.” By using this definition, we acknowledge that significant input from residents of the local area is essential to performing a community diagnosis effectively. Although a great deal of quantified health data can be obtained from the State, the process will only be successful if local citizens are fully involved and are comfortable with the eventual findings. This is why the formation and effective utilization of county health councils are vital in achieving accurate results.

History/Summary:

Lewis County, Tennessee was the fifth county initiated to the Community Diagnosis process in the South Central Region. Community members formed the council in July 1997. The initiating meeting was held at the Lewis County Memorial Park Community Building and was hosted and facilitated by the South Central Region’s Community Development staff.

Those present at the initiating meeting were given an overview of the Community Diagnosis process. The group was informed of the intent of the Department of Health to improve their assessment and planning by giving residents an opportunity to assess health problems at the local level. Everyone present was given the opportunity to become a member of the Lewis County Health Council by indicating their interest on a questionnaire provided by the Community Development staff. They were also encouraged to nominate any community member who might be interested in serving on such a council. The Council elected to meet on the first Tuesday of each month.

The first meeting was scheduled for August 5, 1997. At the third meeting, the Council elected Dr. David Oliver, D. O. to serve as Chairman and Shelly Ramey as vice chair. Dr. Oliver resigned as chair in May 1999 after having to relocate. Shelly Ramey is currently serving as chair. The Health Council completed their community diagnosis in May 1998. The Community Development staff analyzed and prepared health data from several sources for the review of the Health Council. A survey was distributed